Company

Company Tracking Number: 90-2415 LTC (1009)

TOI: LTC031 Individual Long Term Care Sub-TOI: LTC031.001 Qualified

Product Name: 90-2415 LTC (1009)

Project Name/Number: 90-2415 LTC (1009)/90-2415 LTC (1009)

Filing at a Glance

Company: Northwestern Long Term Care Insurance Company

Product Name: 90-2415 LTC (1009)

SERFF Tr Num: NWST-126391348 State: Arkansas

TOI: LTC03I Individual Long Term Care

SERFF Status: Closed-Filed

State Tr Num: 44136

Co Tr Num: 90-2415 LTC (1009)

State Status: Closed

Filing Type: Advertisement Reviewer(s): Marie Bennett

Authors: Addie Croeker, John Disposition Date: 12/09/2009

Kotarski

Date Submitted: 11/19/2009 Disposition Status: Filed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: 90-2415 LTC (1009) Status of Filing in Domicile: Pending

Project Number: 90-2415 LTC (1009)

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Filing Status Changed: 12/09/2009 Explanation for Other Group Market Type:

State Status Changed: 12/09/2009

Deemer Date: Created By: Addie Croeker

Submitted By: Addie Croeker Corresponding Filing Tracking Number:

Filing Description:

We are submitting the attached form for your review and approval, if necessary, as advertising material for the Long Term Care Policy and related forms which have been previously approved in your state.

These pieces are intended for use by our agents to educate clients and prospects on the long-term care Partnership Program and how it works with medicaid.

If you should have any questions regarding the enclosed forms, you may call me at (414) 665-5637 or you can e-mail me at johnkotarski@northwesternmutual.com. On e-mails that are sent, please copy Addie Croeker at addiecroeker@northwesternmutual.com.

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Sincerely,

John Kotarski

Product Compliance Specialist

Company and Contact

Filing Contact Information

John Kotarski, Product Compliance Specialist johnkotarski@northwesternmutual.com

720 East Wisconsin Avenue 414-665-5637 [Phone] Rm S845 414-665-5006 [FAX]

Milwaukee, WI 53202

Filing Company Information

Northwestern Long Term Care Insurance CoCode: 69000 State of Domicile: Wisconsin

Company

720 East Wisconsin Avenue Group Code: 860 Company Type: Long Term Care

Rm S845 Group Name: State ID Number:

Milwaukee, WI 53202 FEIN Number: 36-2258318

(414) 271-1444 ext. [Phone]

Filing Fees

Fee Required? Yes
Fee Amount: \$25.00
Retaliatory? No

Fee Explanation: \$25 per form

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Northwestern Long Term Care Insurance \$25.00 11/19/2009 32173329

Company

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Marie Bennett	12/09/2009	12/09/2009

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Disposition

Disposition Date: 12/09/2009

Implementation Date:

Status: Filed Comment:

Rate data does NOT apply to filing.

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Schedule Item Schedule Item Status Public Access

Form Brochure: Partnerships & Medicaid Yes

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Form Schedule

Lead Form Number: 90-2415 LTC (1009)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	90-2415 LTC (1009)		Brochure: Partnerships & Medicaid	Initial		0.000	90-2415 LTC (1009).pdf

This example illustrates a hypothetical situation of Medicaid Assistance through a Partnership Qualified Long-Term Care QuietCare® Policy.

Partnership Qualified Long-Term Care Policy	The Need for Long–Term Care Occurs	\$70,030 Assets to be spent down in order to qualify for Medicaid Assistance	
Nancy, Single Mother, Age 45 A Partnership Qualified Long-Term Care Insurance policy is purchased with the intention to preserve a portion of her total assets for her children. Nancy's Partnership Qualified Long-Term Care Insurance Policy has the following benefits: \$150 daily benefit 3 year benefit period 12 week elimination period Automatic Benefit Increase inflation option at 5% Her total Benefit Account Value at issue is \$164,250	At Age 75 A Long-Term Care Claim is made and she becomes eligible to receive benefits. She begins to pay for her care with the benefits being received from her QuietCare® Long-Term Care Insurance Policy. The QuietCare® Long-Term Care Benefit Account Value has indexed to \$716,481 at time of claim. By age 78, Nancy has used all of her benefits and exhausts² her QuietCare® Long-Term Care Insurance Policy. The policy paid out a total of \$752,970³ in benefits.	At Age 78 After exhausting her QuietCare® Long-Term Care Insurance Policy there is still a need for long-term care services and Medicaid Assistance is applied for. Nancy's total assets protected against Medicaid equal \$754,970; (\$752,970 plus the \$2000 resource allowance).4 Her assets are worth \$825,000. Nancy is required to spend down \$70,030 of her assets (\$825,000 minus \$754,970) in order to satisfy the state asset limitation requirement to receive Medicaid Assistance. She must also contribute any income above the state allowance towards her long-term care expenses.5	At Age 88 Nancy Passes away and \$754,970 of her assets are preserved for her children.

Partnership & Medicaid requirements vary by state. Partnership qualified policies are not available in all states. QuietCare® is long-term care insurance issued by Northwestern Long Term Care Insurance Company.

- ¹ This information does not apply to California, Connecticut, Indiana, and New York, which are Pre-DRA Partnership states. Northwestern Long Term Care Insurance Company does not participate in these states' Partnership programs.
- ² Exhaustion of long-term care insurance benefits is not required in order to qualify for Medicaid in most Partnership states. This means that in most states, an insured may receive monthly long-term care insurance benefits and still obtain Medicaid benefits that pay the difference between the cost of care services and the insurance benefits, if they otherwise meet Medicaid eligibility rules.
- ³ Total Benefit Account Value is greater than at time of claim due the continued annual indexing of benefits while on claim.
- ⁴ In most states the asset threshold is \$2,000 for a single person. Asset thresholds for married couples are typically higher.
- ⁵ In addition to asset limitations, eligibility for benefits under Medicaid is subject to other eligibility requirements, such as income limits, home equity limitations, and other resource limitations.

Northwestern Long Term Care Insurance Company's long-term care insurance policy contains exclusions and limitations. The purpose of this material is for the marketing and solicitation of insurance.

Northwestern Long Term Care Insurance Company · A subsidiary of The Northwestern Mutual Life Insurance Company · Milwaukee, WI www.nmfn.com

Insurance Policy forms RS.LTC.(0708) and RS.LTC.ML.(0708). Policy form RS.LTC.ML.(0708) is only available in NJ, NY, OH and PA. 90-2415 LTC (1009)



A Northwestern Mutual Company

Partnership & Medicaid

Quiet Care®





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90-2415 LTC (1009)

Medicaid and Long-Term Care

Medicaid is a welfare program, also referred to as Title XIX, and is available only to certain low-income individuals and families who fit into an eligibility group that is recognized by federal and state law.

Within federally-defined limits, each state sets its own guidelines regarding eligibility and services that it will provide. In order to qualify for Medicaid, individuals must meet both the asset AND income limitations that are set by the state in which they reside. This means they may have to spend down (use up) most of their assets on care.

Often, people begin paying for their long-term care out of pocket, and spend down their financial resources until they qualify for Medicaid. When they become eligible for Medicaid, most of their income must be used to pay for their care, with Medicaid paying the remaining costs. Federal law requires states to recover the costs of any Medicaid benefits received, usually from the recipient's estate.

Services that are provided under Medicaid may not be the same as the services that would be covered under a comprehensive long-term care insurance policy. For example:

- Many state Medicaid programs do not pay for room and board costs in an Assisted Living Facility.
- Medicaid will only cover care provided in Medicaid-approved nursing facilities.
- Not every nursing facility or health care provider accepts Medicaid patients.
- In some states there is a shortage of Medicaid beds, so there may be a waiting list. There may also not be availability in an individual's first choice of nursing facilities.

What is Partnership?

The Partnership Program is intended to encourage consumers to take on the financial responsibility of planning for their own LTC costs. The "partners" in the program are insurance companies and the State Medicaid Offices.

The recently developing Partnership Plans¹ are an outgrowth of the Deficit Reduction Act (DRA) of 2005. The Act allows for long-term care policies that meet certain state and federal requirements to protect some of the insured's assets for Medicaid purposes. For every dollar of long-term care insurance benefits that are received from a Partnership Qualified Policy, a dollar of assets would be protected from Medicaid if the insured were ever to seek Medicaid Assistance.

The amount of protected assets will equal the amount of benefits paid, up to the lifetime maximum coverage of the Long-Term Care Policy. Non-exempt income and assets which exceed the Partnership Protected assets must be spent down before the insured can seek Medicaid Assistance. In addition to asset limitations, eligibility for benefits under Medicaid is subject to other financial requirements, such as applicable income limits, home equity limitations, and other applicable resource limitations.

Partnership Qualified Policies must meet special state requirements including provisions for inflation protection. Since these policies must include inflation protection, the amount of the benefits you receive can be higher than the amount of insurance protection you originally purchased. Often the only difference between a Partnership Qualified Policy and other policies is the amount and type of inflation protection required by the state.

Keep in mind that Partnership & Medicaid requirements vary by state and that QuietCare® Partnership Qualified Polices are not available in all states at this point in time.

Is Partnership Right For Me?

If you think that you may need to rely on Medicaid for some of your future care, the partnership program is a way for you to protect a portion of your assets against Medicaid. Unfortunately it does not protect your income, or offer the flexibility you may want for your long-term care.

If you decide to purchase a Partnership Qualified QuietCare® Long-Term Care Policy:

- The amount of Partnership Protected Assets will equal the amount of benefits paid to the insured, up to the Benefit Account Value of the Policy.
- You must first use your own income and assets which exceed the Partnership Protected Assets before Medicaid will start paying. Even after asset qualification, you still must contribute income to cost of care.
- The services provided by your Medicaid program may be less or more than what you received under your Partnership Qualified Long-Term Care policy.
- Once receiving Medicaid assistance, Medicaid limits choice and control over where and how you receive care.

If you decide to purchase a Long-Term Care Insurance Policy with Lifetime Coverage:

- The long-term care policy will pay out up to your full benefit amount for as long as you need care.
- The policy reduces the risk of having to contribute your income toward your long-term care expenses.
- The policy provides you with choice and control over where and how you receive care.

A long-term care policy with lifetime coverage can help protect your assets AND your income, while minimizing reliance on Medicaid.

How important is it to you to have choices while protecting your assets? Both options offer you protection, but the lifetime benefit coverage can also offer you more flexibility when you may need it the most.

